ENVELOPE MAY 1 5 2019

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Earm	990-T	E				siness Income		Ju.	OMB N	o 1545-0687
FOIT		For cale				der section 6033(o 07/01 , 2017, and endu		018	90	ก <b>17</b>
Donar	tment of the Treasury	1 or care				nstructions and the latest			. 4	
	al Revenue Service	<b>▶</b> Do				ly be made public if your orga		:)(3)	Open to Pu	ublic Inspection for Organizations Only
A T	Check box if		Name of organization (			ne changed and see instruction		D Empl	oyer identific	ation number
	address changed							(Emplo	oyees trust see	instructions )
BExe	empt under section		THE J. PAUL	GETTY T	RUST					
Х	501( C <u>)(</u> 23=)	Print	Number street, and room	n or suite no I	lf a P O	box see instructions		95-1	790021	
	408(e) 220(e)	Type	,							ss activity codes
	408A 530(a)		1200 GETTY C	ENTER D	R.,	# 401		(See in	nstructions)	
	529(a)		City or town state or pro	ovince, countr	y, and Z	ZIP or foreign postal code				
	ok value of all assets	l	LOS ANGELES,	CA 900	49			4512	11	523000
at e	end of year	F Gro	up exemption number (	(See instruct	ions )	<b>-</b>				
10	0991862987.	G Che	eck organization type	501	(c) co	rporation X 501(c	trust	401(a)	trust	Other trust
H D	escribe the organiz	zation's p	rimary unrelated busine	ess activity	>	ATTACHM	ENT 1			
I D	uring the tax year,	was the	corporation a subsidiar	ry in an affili	iated g	roup or a parent-subsidiary of	controlled group?		▶∟	Yes X No
If	"Yes," enter the n	ame and	identifying number of t	he parent co	rporation					
			WILLIAM G. HUM			Telephon	e number 🕨 31	0-440	-6040	<u>.                                    </u>
Pai	t I Unrelated		or Business Incom	ie		(A) Income	(B) Expen	ses		(C) Net
1 a	Gross receipts or	sales	2,535,028.							
b	Less returns and allows			c Balance	1c	2,535,028				
2	Cost of goods so	ld (Sched	ule A, line 7)	TAT	2	1,066,831		,	-	
3			2 from line 1c		3_	1,468,197.	,			1,468,197.
4 a	Capital gain net i	ncome (a	ittach Schedule D)		4a	23,613,131.	-		23	3,613,131
b	Net gain (loss) (Fo	rm 4797	Part II, line 17) (attach For	rm 4797)	4b		ı			
С	Capital loss dedu	ction for t	rusts		4c					
5			ps and S corporations (attac		5	19,165,757.	ATCH 2		19	9,165,757
6	Rent income (Sch	edule C)			6					
7	Unrelated debt-fi	nanced in	come (Schedule E)		7_					
8	Interest annuities roya	lties and rei	nts from controlled organization	ns (Schedule F)	8					
9	Investment income of a	a section 50	1(c)(7) (9) or (17) organizatio	on (Schedule G)	9					
10	Exploited exempt	activity ii	ncome (Schedule I)		10					
11	Advertising incom	ne (Sched	fule J)		11					
12	Other income (Se	ee instruc	tions attach schedule)		12	249,577.	ATCH 3	-		249,577
13	Total Combine li	nes 3 thr	ough 12		13	44,496,662.			4 4	4,496,662
Par	t II Deduction	ns Not	Taken Elsewhere	(See instr	ructio	ns for limitations on d	eductions ) (E	Except f	or contrib	utions,
						related business inco				
14	Compensation of	officers,	directors, and trustees (	Schedule K)	<del></del>	ECEIVED	3	14		243,553.
15	Salaries and wage	es	<b>.</b>	. <i>.</i>	P	(ECEIVED	]	15		1,356,887.
16	Repairs and main	tenance		,,	,	IO	l .	16		13,141.
17	Bad debts				۱ ای	MAY . 2 0 . 2019		17		12.
18	Interest (attach so	chedule)			ابا	WAI 20 2015 13		. 18		
19	Taxes and license	s					<del>.</del>	19	<u> </u>	227,948.
20	Charitable contrib	outions (S	See instructions for limit	ation rules)	ΑT	TACHMENT 7	1	20	<u> </u>	
21	Depreciation (atta	ach Form	4562)	in the second	15.1 S. S.	-21	72,51	7.		
22	Less depreciation	claimed	on Schedule A and else	ewhere on re	eturn	22a		22b		72,517.
23	Depletion						. <b></b>	. 23		
24	Contributions to d	deferred o	compensation plans					. 24		
25	Employee benefit	programs	s				. <b></b>	. 25		640,558.
26										
27	Excess readership	costs (S	chedule J)				. <b></b> .	. 27		
28	Other deductions	(attach s	chedule)			ATTACHMI	ENT. 4	. 28	4.4	1,314,068.
29									4 6	5,868,684.
30						deduction Subtract line			-2	2,372,022.
31	Net operating los	s deducti	on (limited to the amou	int on line 30	), AT	TACHMENT 8	. <b></b> .	. 31		
32						ract line 31 from line 30			- 2	2,372,022
33	Specific deductio	n (Gener	ally \$1,000, but see lin	ie 33 instruct	tions fo	or exceptions)		. 33		1,000.
34	Unrelated busine	ess taxa	ble income Subtract	line 33 fro	om lin	or exceptions)	ter than line 3	2,		
	enter the smaller	of zero or	line 32				ુ	b 234	- 2	2,372,022.

S.S.

95	- 1	79	0.0	21	

Page 2

Par	t III	Tax Computation						
35	Organi	zations Taxable as Corporations. Se	e instructions for tax compute	ation Controlled group				
	membe	s (sections 1561 and 1563) check here	See instructions and					
а	Enter y	our share of the \$50,000, \$25,000, and \$	9,925,000 taxable income brack	ets (in that order)				
	(1) \$	(2) \$	(3)					
b	Enter o	ganization's share of (1) Additional 5% tax (no	t more than \$11,750)	\$	] ]			
	(2) Add	tional 3% tax (not more than \$100,000)		\$	]			
С		tax on the amount on line 34			35c			
36	Trusts	Taxable at Trust Rates See in	struct <u>ions</u> for tax computati	ion Income tax on				
	the amo	ount on line 34 from X Tax rate schedule o	r Schedule D (Form 1041)	) <b>.</b>	36			
37	Proxy t	ax See instructions			37	•		
38		ive minimum tax			38	2,2	63,6	62.
39		Non-Compliant Facility Income. See instruction			39			
40	Total A	dd lines 37, 38 and 39 to line 35c or 36, which	never applies		40	2,2	63,6	62.
Par	t IV	Tax and Payments			,			
41 a	Foreign	tax credit (corporations attach Form 1118, tru	sts attach Form 1116). 45.0 4	a 2,263,662.				
		redits (see instructions)			]		•	
		business credit Attach Form 3800 (see instruc		c	1			
d	Credit f	or prior year minimum tax (attach Form 8801 o	r 8827)	d	]			
	Total cr	edits Add lines 41a through 41d		!	4/1e	2,2	63,6	62.
42	Subtrac	t line 41e from line 40	. <u></u> <u></u>		42			
43	Other ta	kes Check if from Form 4255 Form 8611	Form 8697 Form 8866	X Other (attach schedule)	43		8,8	44.
44	Total ta	x. Add lines 42 and 43			44		8,8	44.
45 a		its A 2016 overpayment credited to 2017		· ·	] "			
		stimated tax payments	1.1	I	] [			
С	Tax dep	osited with Form 8868		ic	]			
d	Foreign	organizations Tax paid or withheld at source (s	see instructions) ATCHOLA. 45	5,333.				
е	-	withholding (see instructions)		ie				
f		or small employer health insurance premiums (		5f				
g			439		1			
	F	orm 4136	Total ▶ 45	ig	الحما			
46	Total p	ayments Add lines 45a through 45g			46			
47	Estimat	ed tax penalty (see instructions) Check if Form	2220 is attached		47			
48		e. If line 46 is less than the total of lines 44 and			48	·	3,5	11.
49	Overpa	yment. If line 46 is larger than the total of lines	44 and 47, enter amount overpaid		49			
50_	Enter the	e amount of line 49 you want Credited to 2018 est	mated tax	Refunded >	50			
Par	t V	Statements Regarding Certain A	ctivities and Other Inforn	nation (see instruction	s)			
51	At any	time during the 2017 calendar year, did	the organization have an interest	est in or a signature or	other a	authority	Yes	No
	over a	financial account (bank, securities, or other	ner) in a foreign country? If Y	/ES, the organization m	ay have	to file		ì
	FinCEN	Form 114, Report of Foreign Bank and	Financial Accounts If YES, e	enter the name of the	foreign	country		لہ ــــ
	here 🕨	SEE ATTACHMENT 5					X	
52	During	the tax year, did the organization receive a dist	ribution from, or was it the grantor	of, or transferor to, a fore	ign trust?		[	Х
	If YES, s	ee instructions for other forms the organization	may have to file					]
53		e amount of tax-exempt interest received or ac						
	l to	nder penalties of penury, I declare that I have examined ie, correct, and complete Dgclaration-of preparer (other than to			est of my	knowledge a	nd belie	f, it is
Sig	u 🚩	Atlo		M	ay the IF	RS discuss	this re	etum
Her		JAT TIUSON				reparer sho		elow
	s	gnature of officer	Date Title		e instruction	s)? X Yes	s	No
Paid	1	Print/Type preparer's name	Preparer's signature/	Date Chec	k l l l l f	PTIN		_
	arer	CAREY MCKEE	100		mployed	P0128		<u>/</u>
	Only	Firm's name ► KPMG LLP				3-55652		
	,	Firm's address ▶ 550 S. HOPE ST., S	SUITE 1500, LOS ANGELE	ES, CA 90071 Phon	eno 2	13-972-		
						Earn QQ	11- F /	20171

THE J. PAUL GETTY TRUST

	)	
_	95 - 1	7900

Schedule A - Cost of Goo	ods Sold. Er	ter method o	of inventory	valuation	►AT COS	T	<del>.</del>	Page 3	
Inventory at beginning of year		334,				ar	6	352,940.	
2 Purchases	` <del>                                    </del>	1,085,				ld. Subtract line			
3 Cost of labor	· · <del>                                  </del>				•	ter here and in	1 1		
4a Additional section 263A cost	· ·						·	1,066,831.	
(attach schedule)	1.1		8			section 263A (	with respect	to Yes No	
<b>b</b> Other costs (attach schedule)	• • ———					or acquired fo			
5 Total. Add lines 1 through 4		1,419,	771.						
Schedule C - Rent Income ( (see instructions)  1. Description of property	From Real P	roperty and	l Persona	l Property	Leased V	Vith Real Prope	erty)		
								<del></del> -	
(1)									
(2)	<del>.</del>								
(3)		<del></del>							
(4)	2 Part sees					I			
		ved or accrued							
(a) From personal property (if the pe for personal property is more than more than 50%)		percentage	(b) From real and personal properly (if the percentage of rent for personal properly exceeds 50% or if the rent is based on profit or income)			3(a) Deductions directly connected with the inco in columns 2(a) and 2(b) (attach schedule)			
(1)									
(2)									
(3)									
(4)									
Total		Total							
(c) Total income. Add totals of colu	ımns 2(a) and 2	b) Enter		•		(b) Total deducti Enter here and o			
here and on page 1, Part I, line 6, c						Part I, line 6, colu			
Schedule E - Unrelated Deb			instruction	s)					
			2 Gross inc	ome from or	3 [	Deductions directly co		locable to	
1 Description of debt-f	inanced property		allocable to d	ebt-financed	(a) Straint		ced property (b) Other	deductions	
			prop	erty	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)		
(1)								·-	
(2)									
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  5 Average adjusted basi of or allocable to debt-financed property (attach schedule)		ble to property	erty by solumn			income reportable n 2 x column 6)	(column 6 x t	e deductions otal of columns nd 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
Totals					Part I, lin	e and on page 1, e 7, column (A)	Enter here a Part I, line 7	nd on page 1, , column (B)	

Form **990-T** (2017)

Form 990-T (2017)

Schedule r - Interest, Annu		Exem	pt Controlled O			<del></del>		,	
Name of controlled organization	2 Employer identification numb	er i	t unrelated income ) (see instructions)	l l	of specified ents made	ıncluded	5 Part of column 4 that is included in the controlling organization's gross income		6 Deductions directly connected with income in column 5
(1)									
(2)									
(3)									
(4)				<u> </u>		L			
Nonexempt Controlled Organiz	zations						T		<del>. <u>.</u> </del>
7 Taxable Income	8 Net unrelated ii (loss) (see instruc		9 Total of specific payments mad		includ	t of column ed in the co ation's gros	ntrolling		Deductions directly nected with income in column 10
(1)									
(2)									
(3)									
(4)					ļ <u></u> .	columns 5 a			dd columns 6 and 11
Totals	come of a Sec	 ction 501(c		7) Orga	Part I		mn (A)		ter here and on page 1, int I, line 8, column (B)
1 Description of income	2 Amount of	f income	directly co	nnected			t-asides schedule)	_	and set-asides (col 3 plus col 4)
(1)	ļ		<del> -</del>					$\dashv$	
(2)	-							$\dashv$	
(3)									· · · · · · · · · · · · · · · · · · ·
(4)	Enter here and Part I, line 9, c				<u> </u>				Enter here and on page 1 Part I, line 9, column (B)
Schedule I - Exploited Exe	empt Activity In	come, Othe	l er Than Advert	tising Ir	ncome (s	ee instru	ctions)		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expense directly connected production unrelated business inc	or business of If a gain, of	sted tradé s (column olumn 3) compute	from ac	Gross income a cityity that not unrelated siness income 6 Expenses attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)									
(2)						_			
(3)		/				_			
(4)									7
	Enter here and on page 1, Part I, line 10, col (A)	Enter here an page 1, Par line 10, col	t I,						Enter here and on page 1, Part II, line 26
Totals ▶ Schedule J - Advertising In	come (see instr	uctions)				<del></del>			<u> </u>
Part I Income From Per	iodicals Report	ted on a Co	nsolidated Ba	sis					
1 Name of periodical	2 Gross advertising income	3 Direct advertising c	4 Adve	rtising ess) (col col 3) If ompute		culation	6 Reader costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)									· .
(2)									_
(3)									
(4)					ļ				-
Totals (carry to Part II, line (5))									
		<u></u>							Form <b>990-T</b> (2017

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶					•	
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶			•	-		

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2. Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2) ATTACHMENT 6		%	•
(3)		%	•
(4)		%	
Total. Enter here and on page 1, Part II, line 14		<u></u>	243,553.

Form **990-T** (2017)

#### SCHEDULE I (Form 1041)

# Alternative Minimum Tax - Estates and Trusts

OMB No 1545-0092

2017

Department of the Treasury Internal Revenue Service ► Attach to Form 1041.

▶ Go to www irs.gov/Form1041 for instructions and the latest information.

Employer identification number Name of estate or trust THE J. PAUL GETTY TRUST 95-1790021 Estate's or Trust's Share of Alternative Minimum Taxable Income -2,372,022.00 1 1 2 2 3 227,948.00 4 5 5 72,053.00 6 6 7 7 8 8 9 9 Exercise of incentive stock options (excess of AMT income over regular tax income)..... 10 10 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) . . . . . . . . . . 11 11 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) . . . . . . . . . . . . 12 12 40,103.00 13 13 1,152,355.00 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) . . . . . 14 14 15 630,833.00 15 16 16 17 17 18 18 19 19 20 20 Income from certain installment sales before January 1, 1987............. 21 21 16,081,734.00 22 22 23 23 136,806.00 Alternative tax net operating loss deduction (See the instructions for the limitation that applies ) . . . . 24 (7,871,887.00) 24 8,097,923.00 Adjusted alternative minimum taxable income Combine lines 1 through 24 . . . . . . . . . . . . . . . 25 Note: Complete Part II below before going to line 26 26 27 Estate tax deduction (from Form 1041, line 19). . . . . . . . . . . . . . Estate's or trust's share of alternative minimum taxable income Subtract line 28 from line 25. . . . . 29 8,097,923.00 If line 29 is • \$24,100 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c The estate or trust isn't liable for the alternative minimum tax Over \$24,100, but less than \$176,850, go to line 45 • \$176,850 or more, enter the amount from line 29 on line 51 and go to line 52 Income Distribution Deduction on a Minimum Tax Basis Part II 30 Adjusted tax-exempt interest (other than amounts included on line 8)....... 31 31 Total net gain from Schedule D (Form 1041), line 19, column (1) If a loss, enter -0- . . . . . . . . . 32 32 Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4)..................... 33 Capital gains paid or permanently set aside for charitable purposes from gross income (see 34 Capital gains computed on a minimum tax basis included on line 25 . . . . . . . . . . . . . . . . . 35 35 Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount.... 36 Distributable net alternative minimum taxable income (DNAMTI) Combine lines 30 through 36 37 37 Income required to be distributed currently (from Form 1041, Schedule B, line 9) . . . . . . . . . . 38 38 Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10) 39 39 40 40 Tax-exempt income included on line 40 (other than amounts included on line 8) . . . . . . . . . . . 41 Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40 . . . . .

For Paperwork Reduction Act Notice, see the Instructions for Form 1041

Schedule I (Form 1041) (2017)

		_
Schedule I (Form 1041) (2017)	Pag	e 2

	14 Offic 104 () (2017)		rage =
Pai	t II Income Distribution Deduction on a Minimum Tax Basis (continued)		
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line 37		
	If zero or less, enter -0	43	
44	Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 or line 43.		
	Enter here and on line 26	44	
Pai	t III Alternative Minimum Tax		
45	Exemption amount	45	\$24,100 00
46	Enter the amount from line 29		
47	Phase-out of exemption amount	]	
48	Subtract line 47 from line 46. If zero or less, enter -0		
49	Multiply line 48 by 25% (0 25)	49	2,004,368.00
50	Subtract line 49 from line 45 If zero or less, enter -0	50	-
51	Subtract line 50 from line 46	51	8,097,923.00
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or has a		
	gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if		
	necessary) Otherwise, if line 51 is -		
	• \$187,800 or less, multiply line 51 by 26% (0 26)		
	• Over \$187,800, multiply line 51 by 28% (0 28) and subtract \$3,756 from the result	52	2,263,662.00
53	Alternative minimum foreign tax credit (see instructions)	53	
54	Tentative minimum tax Subtract line 53 from line 52	54	2,263,662.00
55	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)	55	
56	Alternative minimum tax. Subtract line 55 from line 54 If zero or less, enter -0- Enter here and		
	on Form 1041, Schedule G, line 1c	56	2,263,662.00
Pa	t IV Line 52 Computation Using Maximum Capital Gains Rates		
	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing this part		
57	Enter the amount from line 51	57	
58	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as refigured for the AMT, if necessary)		
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as		
	refigured for the AMT, if necessary) If you didn't complete Schedule D		
	for the regular tax or the AMT, enter -0		
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or		
	the AMT, enter the amount from line 58. Otherwise, add lines 58 and 59.		
	and enter the smaller of that result or the amount from line 10 of the		
	Schedule D Tax Worksheet (as refigured for the AMT, if necessary) 60		
61	Enter the smaller of line 57 or line 60	61	
62	Subtract line 61 from line 57	62	
63	If line 62 is \$187,800 or less, multiply line 62 by 26% (0 26) Otherwise, multiply line 62 by 28%		_
	(0 28) and subtract \$3,756 from the result	63	
64	Maximum amount subject to the 0% rate		
65	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as figured for the regular tax) If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22, if zero or less, enter -0-		
66	Subtract line 65 from line 64 If zero or less, enter -0	]	
67	Enter the smaller of line 57 or line 58	]	
68	Enter the smaller of line 66 or line 67. This amount is taxed at 0%	]	
69	Subtract line 68 from line 67,	1	•

Schedule I (Form 1041) (2017)

Schedule I (Form 1041) (2017) Page 3

Pai	t IV Line 52 Computation Using Maximum Capital Gains Rates	(conti	nued)		
70	Maximum amount subject to rates below 20%	70	\$12,500 00	] !	
71	Enter the amount from line 66	71	2,550.00	] !	
72	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22, if zero or less, enter -0	72			
73	Add line 71 and line 72	73	2,550.00		
74	Subtract line 73 from line 70 If zero or less, enter -0	74	9,950.00		
75	Enter the smaller of line 69 or 74	75_			
76	Multiply line 75 by 15% (0 15)			76	
77	Add lines 68 and 75	77			
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83. O		ise, go to line 78.		
78	Subtract line 77 from line 67	78			
	Multiply line 78 by 20% (0.20)			79	
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. Othe				
80	Add lines 62, 77, and 78			]	
81	Subtract line 80 from line 57				
82	Multiply line 81 by 25% (0 25)			82	
83	Add lines 63, 76, 79, and 82			83	
	If line 57 is \$187,800 or less, multiply line 57 by 26% (0.26) Otherwise,				
	(0 28) and subtract \$3,756 from the result		• •	84	
85	Enter the smaller of line 83 or line 84 here and on line 52			85	
				Sch	edule I (Form 1041) (2017)

JSA

#### **SCHEDULE D** (Form 1041)

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10. ► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

THE J. PAUL GETTY TRUST

Employer identification number

95-1790021

Note: Form 5227 filers need to complete only Parts I and II Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on (g) Adjustments (h) Gain or (loss) Subtract column (e) the lines below to gain or loss from from column (d) and Proceeds Cost Form(s) 8949, Part I, line 2, column (g) This form may be easier to complete if you round off cents (sales pnce) (or other basis) combine the result with column (g) to whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b. 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824.......... 4 122,183.00 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . . . . . . Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2016 Capital Loss 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h) Enter here and on 122,183.00 Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) the lines below to gain or loss from from column (d) and Proceeds Cost Form(s) 8949, Part II, (or other basis) combine the result with This form may be easier to complete if you round off cents (sales price) line 2, column (g) column (g) to whole dollars 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 10 Totals for all transactions reported on Form(s) 8949 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . . . . . . . . . 11

Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. . . . . . . . . .

Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2016 Capital Loss

Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2017

**12** | 8,762,537.00

14,728,411.00

23,490,948.00

13

14

15

12

13

Part	ule D (Form 1041) 2017  Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	Page <b>2</b>
r ai i	Caution: Read the instructions before completing this pa	art.	(see instr.)	or trust's	(3) Total
17	Net short-term gain or (loss)	17		122,183.00	122,183.00
18	Net long-term gain or (loss):				
а	Total for year	18a		23,490,948.00	23,490,948.00
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	18b		514,723.00	514,723.00
C	28% rate gaın	18c			
	Total net gain or (loss). Combine lines 17 and 18a ▶	19		23,613,131.00	23,613,131.00
Note: gains, necess	If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 go to Part V, and <b>don't</b> complete Part IV If line 19, column (3), is a neary	or Fo, et loss,	orm 990-T, Part I, line , complete Part IV an	4a) If lines 18a and 19 d the <b>Capital Loss Can</b>	), column (2), are net ryover Worksheet, as
Part			-		-
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F				,
a	The loss on line 19, column (3) or b \$3,000		4 4 4 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	20 (	)
Loss C	If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, carryover Worksheet in the instructions to figure your capital loss carryover	page	1, line 22 (or Form 99	0-1, line 34), is a loss,	complete the Capital
Part		es		<del> </del>	
	1041 filers. Complete this part only if both lines 18a and 19 in col	lumn (	(2) are gains, or an a	amount is entered in	Part I or Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more				
	on: Skip this part and complete the <b>Schedule D Tax Worksheet</b> in the	ınstru	ctions if		
	ther line 18b, col (2) or line 18c, col (2) is more than zero, or			<b>~</b>	
	th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
	990-T trusts. Complete this part only if both lines 18a and 19 are gar, and Form 990-T, line 34, is more than zero. Skip this part and com				
	8b, col (2) or line 18c, col (2) is more than zero	ipiete	the Schedule D Ta.	A WOLKSHEEL III LIIE I	instructions if either
		24)	. 21		
	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	54)	.   21		
	Enter the smaller of line 18a or 19 in column (2) but not less than zero			ľ	
	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 23				
	Add lines 22 and 23		<del></del>		
	If the estate or trust is filing Form 4952, enter the		<del>- </del>		
	amount from line 4g, otherwise, enter -0 ▶ 25				
	Subtract line 25 from line 24. If zero or less, enter -0		. 26		
	Subtract line 26 from line 21. If zero or less, enter -0		<del></del>		
	Enter the smaller of the amount on line 21 or \$2,550				
	Enter the smaller of the amount on line 27 or line 28				
	Subtract line 29 from line 28 If zero or less, enter -0- This amount is		<del></del>	▶ 30	
	Enter the smaller of line 21 or line 26		1 1		
	Subtract line 30 from line 26		T		
	Enter the smaller of line 21 or \$12,500		. 33		•
	Add lines 27 and 30				
35	Subtract line 34 from line 33 If zero or less, enter -0		. 35		
	Enter the smaller of line 32 or line 35				
	Multiply line 36 by 15% (0 15)			▶ 37	
	Enter the amount from line 31				
	Add lines 30 and 36				
40	Subtract line 39 from line 38 If zero or less, enter -0		. 40	, ,	
	Multiply line 40 by 20% (0 20)		•	▶ 41	
	Figure the tax on the amount on line 27 Use the 2017 Tax Rate Schedule for		1 1	.	
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)				
	Add lines 37, 41, and 42		— <del></del>		
	Figure the tax on the amount on line 21 Use the 2017 Tax Rate Schedule for				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)				
	·				

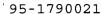
Schedule D (Form 1041) 2017

45

A33

A34

E41



### ATTACHMENT 2

B1		639,074.
E1		1,379,772.
E3	•	88,293.
A4	!	-4,253.
F8		-1,382.
E8		-174,366.
E7		292,351.
E9		-240,834.
<b>A</b> 6		-959.
A14		54,443.
A15		1,549.
A19		8,622.
A22		11,034.
D4		51,229.
E12		-1,737.
E11		1,388,804.
E13		3,793,984.
D1 C		4 002

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS

E15 -4,902. -82,753. E14 45,126. E182A 42,154. E182B A26 171,841. A27 78,654. 10,477. E18 E23 121,389. C10 18,191. E24 -614,880. E28 9,457. E27 -33,098. 49,655. A32 E29 201,427.

-217,574. 61,706. G1 G2 6,237. -32,230. C13 A38 -3,193. 594,506. A39 E36 317,411. E37 177,507. E40 355,986. G3 -631,338.

137,178. E45 -835,025. E46 919,765. E47

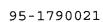
-84,332.

518,421.

# ATTACHMENT 2 (CONT'D)

N.	•
E48	-253,625.
E49	-207,528.
E39	-330,048.
E51	245,322.
E50 `	133,668.
E52	328,694.
E52 E53	-2,019,749.
	-158,096.
A42A	
A42	52,569.
E55	183,130.
E56	16,975.
E57	4,712.
A43	1,879.
G4	2,623,705.
G5	-931,802.
E44	-292,068.
A45	-4,976.
A47	-15,714.
B19	113,193.
A76	-22,517.
G6	11,450.
A51	-29,247.
A52	82,408.
A53	8,105.
A54	2,730.
E71	1,243,402.
E72A	331,999.
E72B	13,587.
A58A	-5,257.
A58B	-2,693.
G7	234.
A57	9,981.
G8	-700.
A59	-30,015.
G9	′-4,588.
G10	19,321.
E78	2,538,860.
G11	677,223.
F44	-16,279.
E79	-665,468.
E80	-601,672.
E83	-22,323.
D26	171.686
A67A	69,624.
E84	-266,016.
E90	-54,208.
· ·	54,200.





# ATTACHMENT 2 (CONT'D)

E89	-48,986.
E91	1,186,532.
C20	-16,103.
E94	-24,230.
G12	\ -610,180.
G13	-9,258.
E95	42.
E96	-117,597.
E114	2,313,015.
E105	420,864.
E106	-165,999.
E108	35,818.
E107	-71,065.
A72	369,384.
E109	-5.
E110	-15.
E111	-88,577.
E116	-4,396.
E117	-3,095.
E118	68,509.
E119	75,988.
C26	-103,023.
C27	119,209.
A73	-82,220.
A74	-210,484.
E98A	42,257.
A75	3,337.
E124~	34,891.
E125	43,425.
A77	-206,038.
G14	-51,948.
E127	-691,408.
E129	1,245,643.
E130	22,028.
E131	214,474.
E133	-366,294.
C30	7,653.
C31A	1,732.
C31B	-57.
C31	307,002.
E142	769,201.
E141	1,222,787.
C38	-80,006.
C41	277,092.
E143	-51,107.
A79	-685,725.
1117	003,723.



# ATTACHMENT 2 (CONT'D)

\					4			
E-1 4 4								125 025
E144								-135,035.
A80								78,134.
C62								-213.
E34								1,668.
E150				÷				230,439.
E151								199,834.
E152								-94,084.
E153								-40,625.
E154								-121,975.
C48					•			-232,573.
A84		•				,		2,464.
F65					•			-63,110.
F86			•	•				9,882.
F87								342.
E159								103,790.
E156								-138,743.
E157								-357,672.
G15								-254,824.
C53							_	69,945.
E161								-65,582.
E160			-					58,608.
G16	~							727.
A87								-900.
A89								617.
A99A								-41,884.
C60								4,658.
D45								-6,435.
A95								-2,110.
A96					•			-27,398.
A97							1	115,518.
A98A					$\sim$			-377.
A99B								106,983.
A99C								. 502,455.
A99D				-				-243,000.
A99E								-98,001.
A99F								20,017.
A100A								-4,873.
A101A								1,079.
A101B						<u> </u>		-6,469.
C63								58.
C64								1,010.
C65								79,232.
E174								-12,511.
E175								-171,958.
E178								728,703.
E179								-171,453.

INCOME (LOSS) FROM PARTNERSHIPS ,

19,165,757.

4	
T	

### ATTACHMENT 2 (CONT'D)

E180		161,642.
E181		-27,510.
C67		2,168,673.
A104		-45,045.
A103A	,	177,459.
A103B		-44. `
A103C		289,897.
A103D		2,172.
A103E	•	52,171.
A103F		87,602.
A103G		-4,354.
A103H		247,455.
A103I		34,126.
G20	,	-629,167.

ATTACHMENT 2



ATTACHMENT 3

PART I - LINE 12 - OTHER INCOME

§512(A)(7)QUALIFIED TRANSPORTATION FRINGE BENEFITS

249,577.

PART I - LINE 12 - OTHER INCOME

249,577.

#### ATTACHMENT 4

## FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION UNDER SECTION 199

ACCOUNTING FEES	230,860.
OCCUPANCY	12,222.
TRAVEL	19,484.
PRINTING AND PUBLICATIONS	1,158.
DATA PROCESSING	10,534.
TRAINING	1,736.
DUES & SUBSCRIPTIONS	2,032.
OUTSIDE SERVICES	257,368.
OPERATING SUPPLIES	37,809.
FURNITURE & EQUIPMENT	8,363.
POSTAGE & FREIGHT	50,230.
BANK CHARGES	51,952.
PROMOTIONAL AND ADVERTISING	435.
INVESTMENT MANAGEMENT FEES	2,785,332.
OTHER LIMITED PARTNERSHIP DEDUCTIONS FROM K-1S	40,844,553.

2017 FORM 990-T

THE J. PAUL GETTY TRUST

95-1790021 ATTACHMENT 5

# FORM 990T, PART V, LINE 51 - LIST OF FOREIGN COUNTRIES

EGYPT
KOREA, REPUBLIC OF (SOUTH)
UNITED KINGDOM
CAYMAN ISLANDS

.

ATTACHMENT 6

### SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

NAME AND ADDRESS	TITLE .	BUSINESS PERCENT	COMPENSATION
STEVE ALGERT 1200 GETTY CENTER DR., # 401 LOS ANGELES, CA 90049	MNG. DIR & ASST TREAS.	11.667999	83,277.
WILLIAM G HUMPHRIES 1200 GETTY CENTER DR., # 401 LOS ANGELES, CA 90049	CONTROLLER	4.143000	13,864.
BENJAMIN LIOU 1200 GETTY CENTER DR., # 401 LOS ANGELES, CA 90049	MNG DIR EQ & BONDS, ASST TREAS	14.922902	103,823.
JAMES M WILLIAMS 1200 GETTY CENTER DR., # 401 LOS ANGELES, CA 90049	VP, TREASURER & CIO	2.244380	42,589.
TOTAL COMPENSATION	,	•	243,553.

ATTACHMENT 7

#### FORM 990-T, PART II, LINE 20 CHARITABLE CONTRIBUTIONS

	YEAR ENDING	- TOTAL CONTRIBUTIONS	CONTRIBUTIONS PREVIOUSLY UTILIZED OR EXPIRED	TAX YEAR UTILIZED	CONTRIBUTIONS UTILIZED IN CURRENT YEAR	CONTRIBUTIONS CARRYOVER
						-
•	6/30/2014	6,031,000	(6,031,000)	2014, 2016	-	-
	6/30/2015	6,659,132	(987,852)	2016	-	5,671,280
	6/30/2016	6,897,853			-	12,569,133
	6/30/2017	4,437,524			-	17,006,657
	- 6/30/2018	3,582,799			-	20,589,456
		_	-		<del>-</del>	•
7	OTAL CONTRIBUTI	ON CARRYOVER TO 6/30,	/2019			20,589,456

THE J. PAUL GETTY TRUST

NET OPERATING LOSS CARRYOVER TO 6/30/2019

95-1790021

49,568,078

ATTACHMENT 8

	NOL AS		ADJUSTED			AMOUNT	
YEAR	ORIGINALLY	AMOUNT	NOL	NOL	TAX YEAR	REMAINING	CUMULATIVE
ENDING	PILED	ADJUSTED	TOTAL	UTILIZED	UTILIZED	CARRYOVER	CARRYOVER
6/30/2002	858,071	_	858,071	534,561	2005	_	_
., ,			•	323,510	2006		_
6/30/2003	800,151	-	800,151	800,151	2006	_	_
6/30/2004	2,825,464	-	2,825,464	2,825,464	2006	-	-
6/30/2005	4,121,778	-	4,121,778	627,823	2006	-	
				540,834	2011		
				1,318,268	2012		
				1,634,853	2014		-
6/30/2006	-		•			-	-
6/30/2007	-		-			-	-
6/30/2008	5,955,207	-	5,955,207	1,998,749	2014		
				3,956,458	2016		-
6/30/2009	<sub>J</sub> 20,176,232	-	20,176,232	2,341,816 **	2016	17,834,416	17,834,4
6/30/2010	12,117,799	-	12,117,799			12,117,799	29,952,2
6/30/2011	8,894,181	-	8,894,181			8,894,181	38,846,3
6/30/2012	-		-			-	38,846,3
6/30/2013	-		•			-	38,846,3
6/30/2014	-	3,126,844	3,126,844			3,126,844	41,973,2
6/30/2015	-		-			-	41,973,2
6/30/2016	1,906,593	3,281,162	• 5,187,755			5,187,755	47,160,9
6/30/2017	-		-				47,160,9
6/30/2018	2,372,022	35,061	*** 2,407,083				49,568,0

\*NOL ADJUSTED FOR LATE/AMENDED K-1S RECEIVED SUBSEQUENT TO FILING AND ADJUSTMENTS TO COST DEPLETION DEDUCTIONS
\*\*NOL ADJUSTED FOR 2016 AMENDED RETURN FILED FOR LATE/AMENDED K-1S RECEIVED SUBSEQUENT TO FILING
\*\*\*NOL ADJUSTED FOR 2017 SEC 965 INCLUSION THAT WAS NOT REPORTED ON 990-T, PART I, PER IRS SEC 965 GUIDANCE Q&A

THE J. PAUL GETTY TRUST 95-1790021

ATTACHMENT 9

#### PUBLICLY TRADED PARTNERSHIP PASSIVE ACTIVITY LOSS LIMITATION CARRYFORWARD

	CURRENT YEAR PRIOR YEARS		PRIOR YEARS	CURRENT YEAR		
PUBLICLY TRADED PARTNERSHĮP ACTIVITY	NET INCOME	NET LOSS	UNALLOWED LOSSES	ALLOWED LOSSES	LOSS CARRYFORWARD	
G18	0	(212,480)	0	0	(212,480)	
E5	0	(129,608)	0	0	(129,608)	
E20	0	· (16,959)	0	· 0	(16,959)	
E22	0	(197,316)	(124,418)	0	(321,734)	
E30	0	· (54,230)	0	0	(54,230)	
G19	0	(5)	0	0	(5)	
E38	0	(108,098)	(63,638)	0	(171,736)	
E56	0	(772,189)	(616,689)	0	(1,388,878)	
E57	0	(330,393)	0	0	(330,393)	
E58	0	(653,601)	(385,009)	0	(1,038,610)	
E59	0	(1,519,066)	(868,374)	0	(2,387,440)	
E60	0	(78,029)	(117,210)	0	(195,239)	
E61	0	(147,885)	(128,165)	0	(276,050)	
E65	0	(1,654,655)	(1,323,838)	0	(2,978,493)	
E66	0	(24,376)	0	0	(24,376)	
G8	0	(700)	0	700	0	
E115	0	(316,437)	(279,504)	0	(595,941)	
, E123	٠ 0	(501,195)	(185,874)	0	(687,069)	
G14	0	(52,791)	, 0	52,791	0	
E145	0	(452,537)	0	0	(452,537)	
E146	0	(475,405)	(374,115)	0	(849,520)	
E149	0	(10,810)	O	0	(10,810)	
E155	0	(499,938)	(352,945)	0	(852,883)	
E158	0	(72,675)	0	0	(72,675)	
G20	0	(72,189)	(558,080)	630,269	0	
G21	0	(100,545)	0	0	(100,545)	
E166	0	(35,753)	0	0	(35,753)	
E171	0	(59,385)	(60,829)	0	(120,214)	
E176	0	(430,148)	(292,677)	0	(722,825)	
E177	0	(491,399)	0	0	(491,399)	
E183	0	(122,589)	0	0	(122,589)	
		(9,593,386)	(5,731,365)	683,760	(14,640,991)	

95-1790021

ATTACHMENT 11

FORM 990-T, PART IV, LINE 43 IRC SECTION 965 TRANSITION TAX STATEMENT, CON'T

THE J. PAUL GETTY TRUST INVESTS IN PARTNERSHIP INVESTMENTS AND RECEIVED SCHEDULES K-1 REPORTING THEIR SHARE OF THE TOTAL ALLOCABLE AMOUNT REQUIRED TO BE INCLUDED IN INCOME BY REASON OF SECTION 965(A) OF \$3,814,809 AND TOTAL ALLOCABLE DEDUCTIONS UNDER SECTION 965(C) OF \$2,482,863. HOWEVER, THE SCHEDULES K-1 INDICATED THAT ONLY \$111,015 OF THAT SECTION 965(A) INCOME AND \$75,954 OF THOSE SECTION 965(C) DEDUCTIONS ARE UNRELATED BUSINESS TAXABLE INCOME (UBTI). THOSE UBTI AMOUNTS HAVE BEEN EXCLUDED AS TAXABLE INCOME ON FORM 990-T, PART I, LINE 5 AND ACCORDINGLY, THE NET INCOME TAX LIABILITY UNDER SECTION 965 OF \$8,844 IS REPORTED ON LINE 43.

95-1790021

THE J. PAUL GETTY TRUST

ATTACHMENT 12

### FORM 990, PART IV, LINE 45d FOREIGN ORGANIZATIONS: TAX PAID OR WITHHELD

	1	
PARTNERSHIP	EIN	Amount:
SEQUOIA CAPITAL US GROWTH FUND V, LP	98-1017204	83
SEQUOIA CAPITAL US GROWTH FUND IV, LP	98-0589567	2,614
SEQUOIA CAPITAL US GROWTH FUND VI, LP	98-1162665	2,636
TOTAL	`	5,333

Form 8949

# Sales and Other Dispositions of Capital Asset

► Go to www.irs.gov/Form8949 for instructions and the latest information.

20**17** 

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No 12A

Name(s) shown on return
THE J. PAUL GETTY TRUST

Social security number or taxpayer identification number

95-1790021

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a, you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

1 (a) Description of property	(b) Date acquired	(c)	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an a enter a cod	Adjustment, If any, to gain or loss f you enter an amount in column (g), enter a code in column (f)  See the separate instructions.	
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed of (Mo, day, yr)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	Subtract column (e) from column (d) an combine the result with column (g)
AVAILABLE UPON REQUEST	VAR	VAR			М		152,127.00
1256 CONTRACTS & STRADDLES	VAR	VAR			М		-29,944.00
_							
	,						
2 Totals. Add the amounts in column negative amounts) Enter each tot Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box C a	al here and inc e is checked), lin	lude on your e 2 (if Box B					122,183.00

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. Seè Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2017)

Page 2

0

Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side

Social security number or taxpayer identification number

THE J. PAUL GETTY TRUST

95-1790021

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Long-Term, Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D. line 8a, you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	Cost or other basis See the Note below	Adjustment, if a if you enter an a enter a cod See the separ	(h) Gain or (loss). Subtract column (e) from column (d) and		
(Example 100 sh XYZ Co)	(Mo, day, yr)	(Mo , day, yr )	(see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)	
AVAILABLE UPON REQUEST	VAR	VAR			М		8,807,453.0	
1256 CONTRACTS & STRADDLES	VAR	VAR			М		-44,916.00	
	_							
•								
	<u> </u>			_				
2 Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked) or line 10 (if Box D above is checked) or line 1	here and including the checked), line	le on your 9 (if Box E					8,762,537 00	

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2017)

above is checked), or line 10 (if Box F above is checked)

Form **4562** 

Department of the Treasury Internal Revenue Service (99)

# **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB\_No 1545-0172

Attachment Sequence No 179 Identifying number

Name(s) shown on return

95-1790021 THE J. PAUL GETTY TRUST Business or activity to which this form relates

G	ENERAL DEPRECIATION								
Pa	rt I Election To Expense C Note: If you have any lis				you comp	lete Part I.			
1	Maximum amount (see instructions).						L	1	
2	Total cost of section 179 property pla	aced in service (see in	structions)				L	2	
3	Threshold cost of section 179 proper	ty before reduction i	n limitation (se	e instructio	ns)		L	3	
4 5	Reduction in limitation Subtract line Dollar limitation for tax year Subtract line 4 from separately, see instructions	3 from line 2 If zero o	or less, enter -( -0- If marned filing	)			:::	5	
6	(a) Description				siness use onl				
		<del></del>							-
7	Listed property Enter the amount from	m line 29			7				
8	Total elected cost of section 179 pro	perty Add amounts i	ın column (c), l	ines 6 and	7		L	8	
9	Tentative deduction Enter the smalle	r of line 5 or line 8					L	9	
10	Carryover of disallowed deduction from							10	
11	Business income limitation. Enter the							11	
12	Section 179 expense deduction Add						<u> L</u>	12	
	Carryover of disallowed deduction to				<b>▶</b> 13				
_	e: Don't use Part II or Part III below for								
Pa	rt II Special Depreciation A							e in	structions)
14	Special depreciation allowance for	r qualified property	y (other tha	n listed	property) pl	aced in service	;е		
	during the tax year (see instructions)						· · ·	14	
	Property subject to section 168(f)(1)							15	70.545
	Other depreciation (including ACRS)					<u> </u>		16	72,517
Pa	rt III MACRS Depreciation (	on't include listed			ctions)				
				tion A					
17	MACRS deductions for assets placed	-					$\cdots$	17	<u> </u>
18	If you are electing to group any a asset accounts, check here	<u> </u>	<u> </u>			<u> ▶</u> _			
	Section B - Assets	.,				General Dep	reciatio	on S	ystem
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for (business/inv only - see in	estment use	(d) Recovery period	(e) Convention	(f) Met	hod	(g) Depreciation deduction
19a	3-year property								
b	5-year property	]		_					
С	7-year property	]	/						
d	10-year property								
е	15-year property	,							
f	20-year property								
	25-year property			_	25 yrs		S/L		
h	Residential rental				27 5 yrs	ММ	S/L		<del></del>
	property		_		27 5 yrs	MM	S/L		- <del>-</del>
i	Nonresidential real -				39 yrs	MM	S/L		
	property		<u> </u>		<u> </u>	ММ	S/L		
	Section C - Assets P	laced in Service D	Ouring 2017_	Tax Year	Using the A	Alternative De			System
	Class life	1					S/L		
	12-year	-	_	_	12 yrs	1414	S/L		<del>,</del>
	40-year	1			40 yrs	MM	S/L	·	
	rt IV Summary (See instructi			<del></del>		<del></del>	1	•	·· <del>·</del>
21	Listed property Enter amount from lir						•••	21	
22	Total. Add amounts from line 12, I						- 1		70 517
	here and on the appropriate lines of you					ns	!	22	, 72,517.
23	For assets shown above and place		-						, *
	portion of the basis attributable to se	CUON 263A COSTS	<u> </u>	<u> </u>	23				

JSA For Paperwork Reduction Act Notice, see separate instructions. 7X2300 3 000 KL4408 1639 3/15/2019 7:01:06 AM

Form 4562 (2017)

_												95	-1790	021	n 2
	4562 (2017)	4 /1 1 1			4	41	-11						4		Page 2
Рa		perty (Include a					enicies	s, ce	πain air	craπ, c	eπain	comp	uters,	and p	roperty
		tertainment, recr ny vehicle for whi					milead	ne rai	te or dec	lucting	ا معدما	vnance	comp	dete or	lv 24a
	24b. column	s (a) through (c) of	Section A.	all of S	ection	B. and	Section	Cıfa	pplicable	deting	icase (	zapense	, comp	1010 01	<b>y</b>
		Depreciation and								mits fo	rpasse	nger au	itomobil	es.)	
24a	Do you have evidenc					$\overline{}$	es	No	24b lf "\					Yes	No
	(a)	(b)	(c)				(e)		(f)	1	g)		h)	1	1)
	Type of property (list	Date placed	Business/	Cost	(d) or other b		sis for depr		Recovery		bod/	1 '	eciation	1	ection 179
	vehicles first)	in service	investment us percentage	e Cosi	or other b	bu (bu	siness/inve use only		period	Conv	ention		uction	C	ost
25	Special depreciation	on allowance for	nualified lis	ted no	onerty	nlaced	ın serv	vice d	lurina						
	the tax year and us										. 25				
26	Property used mor					(			<u></u>		.	I .	-		
<u> </u>	,			%					Т	Τ					
	-			%					<del>                                     </del>	<u> </u>		İ			
				<del>%</del>										<del>                                     </del>	
27	Property used 50%	or less in a qualifi				L				<u> </u>		1			
<u> </u>	1 Topotty doed 50%	To the total and a qualification		%					Τ	S/L -		1			
				%					-	S/L -		-		1	
	···			%					+	S/L -		1		1	
20	Add amounts in co	luma (h) lines 25	<u> </u>		horo ar	nd on lu	ne 21 r	200 1	 1		. 28	<u> </u>		1	
	Add amounts in co											L	. 29		
	Add amounts in co	101111 (1), 11110 20 L						,	ehicles	<u></u>	<u></u>	<del></del>	. 23		
C	nplete this section fo	e vahiolog ugad by						_		r" or r	elated r	oercon.	lf you n	royudad	vehicles
	our employees, first an													TOVIGEG	vernoies
	,				a)		b)	1	(c)		d)	1	e)		f)
					icle 1		ıcle 2	v	ehicle 3		ıcle 4		icle 5		rcle 6
30	Total business/inve					ŀ									
24	the year (don't incl					<u> </u>								<del>                                     </del>	
	Total commuting m		-			<del>                                     </del>		1				1			
32		ersonal (nonco	٠,												
	miles driven					<u> </u>		╁──							
33	Total miles drive					}									
	lines 30 through 33		r	Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
34	Was the vehicle			165	140	163	110	163	110	163	100	163	140	163	110
	use during off-duty		r		-	ļ	-					<del> </del> -	+		
35	Was the vehicle					ļ							-		
	than 5% owner or r	· · · · · · · · · · · · · · · · · · ·	ſ		-	<del> </del>		1	+		<del> </del>	<u> </u>	-		
36	Is another vehic		•										1		
	use?			-1	<u> </u>	- D	ida Mal	<u> </u>	- <b>f</b> H	L. Th	ole Fee		<u> </u>	L	L
		ction C - Questic								-					
	wer these question re than 5% owners o				eption	to com	pieting	Secti	ion B for	venicie	s usea	by em	pioyees	wno a	rent
					-									Yes	No
37	Do you maintain										ding co	mmutir	ng, by	163	140
20	your employees?.  Do you maintain			hat pr				· · ·		· · · ·		ting by			
30															
20	employees? See th													<u> </u>	
	Do you treat all use								on from						
40	Do you provide m														
	use of the vehicles								2 (0	4					
41	Do you meet the re	equirements conce	rning qualif	ed aut	omobile	e aemo	nstratio	on use	(See ins	iruction	15)			<u> </u>	<u> </u>
_	Note: If your answ		U, Or 41 IS	res," C	ion t co	inbiere	Section	11 10 10	i the cove	rea ve	iicies				
Pa	rt VI Amortizat	ion			1					_	<del></del>	, 1			
	(a)		_ (b)			(c)			(d)		(e   Amorti			(f)	
	Description o	of costs	Date amort	zation	l An	nortizable	amount	- 1	Code se			d or	Amortiza	ation for th	ns vear

begins 42 Amortization of costs that begins during your 2017 tax year (see instructions)

43 Amortization of costs that began before your 2017 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

Form 4562 (2017)

THE J. PAUL GETTY TRUST

95-1790021

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ATTACHMENT 1

FORM 1041, SCHEDULE I, AMT NOL

	NOL AS		A	DJUSTED .			TAX	
YEAR	ORIGINALLY	THUOMA		NOL	NOL		YEAR	
ENDING	FILED	ADJUSTED		TOTAL	UTILIZED		UTILIZED	CARRYOVER
6/30/2002	696,046	_		696,046	696,046		2005	_
6/30/2003	767,106	-	4	767,106	300		2005	-
0,00,200	,			,	766,806		2006	
6/30/2004	2,813,038	_		2,813,038	2,813,038		2006	_
6/30/2005	4,048,752			4,048,752	1,662,421		2006	_
.,	.,,				· · · · •		2007	
					621,635		2011	
					1,224,356		2012	
					-,,		2013	
					540,340		2014	_
6/30/2006	-	_			· -			-
6/30/2007	-	-		-	_			_
6/30/2008	-	3,592,231	*	3,592,231	3,592,231		2014	-
6/30/2009	70,053	20,176,232	* 2	0,246,285	1,816,462		2014	
., ,					10,191,378	**	2015	
					8,238,445	***	2016	-
6/30/2010	11,943,845	-	1	1,943,845	6,438,290	***	2016	_
					5,505,555		2017	-
6/30/2011	286,467	_		286,467	286,467		2017	-
6/30/2012	· <del>-</del>	-		-	-			-
6/30/2013	-	-		-	-			-
6/30/2014	-	2,079,865	**	2,079,865	2,079,865		2017	
6/30/2015	-	-			-			
6/30/2016	-	-			-			
6/30/2017	-	-			-			
6/30/2018	-	-			_			

<sup>\*</sup>NOL ADJUSTED IN PRIOR YEAR TO CORRECT AMT SCHEDULE I, LINE 1

NET OPERATING LOSS CARRYOVER TO 6/30/2019

<sup>\*\*</sup>NOL ADJUSTED FOR LATE/AMENDED K-18 RECEIVED SUBSEQUENT TO FILING AND ADJUSTMENTS TO COST DEPLETION DEDUCTIONS

<sup>\*\*\*</sup> NOL ADJUSTED FOR 2016 AMENDED RETURN FILED FOR LATE/AMENDED K-1S RECEIVED SUBSEQUENT TO FILING

**General Business Credit** 

► Go to www.irs gov/Form3800 for instructions and the latest information. ▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

OMB No 1545-0895

2017 Attachment Sequence No 22

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return THE J. PAUL GETTY TRUST

Identifying number 95-1790021

Part I		)	
	(See instructions and complete Part(s) III before Parts I and II)		_
1	General business credit from line 2 of all Parts III with box A checked	1	
2	Passive activity credits from line 2 of all Parts III with box B checked 2 38,643.00		20 (42 00
3	Enter the applicable passive activity credits allowed for 2017 See instructions	3	38,643.00
4	Carryforward of general business credit to 2017 Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach	4	182,687.00
5	Carryback of general business credit from 2018 Enter the amount from line 2 of Part III with	-	102,007.00
5	box D checked See instructions	5	
6	Add lines 1, 3, 4, and 5	6	221,330.00
Part II		<u> </u>	221,330.00
7	Regular tax before credits		
	• Individuals Enter the sum of the amounts from Form 1040, lines 44 and 46, or the		
	sum of the amounts from Form 1040NR, lines 42 and 44	l*	
	Corporations Enter the amount from Form 1120, Schedule J, Part I, line 2, or the		
	applicable line of your return	7	
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G,		
	lines 1a and 1b, or the amount from the applicable line of your return $\dots$		
8	Alternative minimum tax		
	• Individuals. Enter the amount from Form 6251, line 35		0 060 660 00
	• Corporations Enter the amount from Form 4626, line 14	8	2,263,662.00
_	• Estates and trusts Enter the amount from Schedule I (Form 1041), line 56 )	9	2 262 662 00
9	Add lines 7 and 8	9	2,263,662.00
40-	Foreign tax credit		
	Foreign tax credit		
	Add lines 10a and 10b	10c	2,263,662.00
C	Add liftes Tod and Tob		
11	Net income tax. Subtract line 10c from line 9 If zero, skip lines 12 through 15 and enter -0- on line 16	11	
12	Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0-		
13	Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000 (see		
	instructions)		
14	Tentative minimum tax.		
	• Individuals Enter the amount from Form 6251, line 33		
	• Corporations Enter the amount from Form 4626, line 12		
	Estates and trusts    Enter the amount from Schedule I		
	(Form 1041), line 54		
15	Enter the greater of line 13 or line 14	15	
16	Subtract line 15 from line 11 If zero or less, enter -0	16	
17	Enter the smaller of line 6 or line 16 · · · · · · · · · · · · · · · · · ·	17	
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition,		
For Par	or reorganization erwork Reduction Act Notice, see separate instructions.	L	Form <b>3800</b> (2017)

JSA

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Form 3	8800 (2017)			Page 3
vame(	s) shown on return		Identifying number	
THE	J. PAUL GETTY TRUST		95-1790023	L
Part	General Business Credits or Eligible Small Business Credits (see ins	structi	ons)	
	plete a separate Part III for each box checked below (see instructions)			
Αĺ	General Business Credit From a Non-Passive Activity E Reserved			
-	X General Business Credit From a Passive Activity F Reserved			
c	<b>–</b>	l Busii	ness Credit Carryforv	vards
D	General Business Credit Carrybacks H Reserved		•	
_	f you are filing more than one Part III with box A or B checked, complete and attach first an a	additio	nal Part III combining a	amounts from all Parts
	I with box A or B checked Check here if this is the consolidated Part III			
·	(a) Description of credit		(b)	(c)
	On any line where the credit is from more than one source, a separate Part III is needed for otherwise.	each	If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount
	Investment (Form 3468, Part II only) (attach Form 3468)	1a	Citity, Cites the Life	
	Reserved	1b		]
c	Increasing research activities (Form 6765)	1c	ATTACHMENT 1	12,191.00
d	Low-income housing (Form 8586, Part I only)	1d		<u>,                                      </u>
e	Disabled access (Form 8826) (see instructions for limitation)	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		<del>.</del>
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1 <u>j</u>		<del></del>
J Ir	Employer-provided child care facilities and services (Form 8882) (see	٠,		<u> </u>
•	instructions for limitation)	1k		
	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
, m	Low sulfur diesel fuel production (Form 8896)	1m	-	
n	Distilled spirits (Form 8906).	1n		
0	Nonconventional source fuel (carryforward only)	10		
g	Energy efficient home (Form 8908)	1p		
þ	Energy efficient appliance (carryforward only)	1q	– –	
ч r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u		1u		
v	Agricultural chemicals security (carryforward only)	1v		<del></del>
	Employer differential wage payments (Form 8932)	1w		
	Carbon dioxide sequestration (Form 8933)	1x	-	
y	Qualified plug-in electric drive motor vehicle (Form 8936)	1y	_	
z		1z	,	
	Employee retention (Form 5884-A)	1aa		
	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb	-	
	Other Oil and gas production from marginal wells (Form 8904) and certain			
_	other credits (see instructions)	1zz	ATTACHMENT 1	26,452.00
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		38,643.00
3,	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4 a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b	ATTACHMENT 1	11,076.00
c	Biofuel producer (Form 6478)	4c		
ď	Low-income housing (Form 8586, Part II)	4d		
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	ATTACHMENT 1	54,551.00
g g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h	V	
i	Increasing research activities (Form 6765)	4i		
i	Reserved	4j		
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		65,627.00
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		104,270.00

Form 3800 (2017)

Page	2
raye	•

Form 3800 (2017)
Name(s) shown on return

Pa identifying number

THE	J. PAUL GETTY TRUST		95-179002	1
Part	General Business Credits or Eligible Small Business Credits (see ins	tructio	ens)	
	plete a separate Part III for each box checked below (see instructions)		<u> </u>	
Αľ	General Business Credit From a Non-Passive Activity E Reserved			
в	General Business Credit From a Passive Activity F Reserved			
- F	<del></del>	Busin	ess Credit Carryforv	vards
Ď	General Business Credit Carrybacks H Reserved		, .	
	you are filing more than one Part III with box A or B checked, complete and attach first an a	addition	al Part III combining a	amounts from all Parts
	I with box A or B checked Check here if this is the consolidated Part III			
	(a) Description of credit		(b)	(c)
oass-	On any line where the credit is from more than one source, a separate Part III is needed for entity	each	If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount
1 a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b_		,,,,, <u>,</u>
С	Increasing research activities (Form 6765)	1c	ATTACHMENT 2	35,727.00
d	Low-income housing (Form 8586, Part I only)	1d		
е	Disabled access (Form 8826) (see instructions for limitation)	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	_1j_		
k	Employer-provided child care facilities and services (Form 8882) (see			
	instructions for limitation)	1k		
ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	, , , , , , , , , , , , , , , , , , , ,	1m		
n	Distilled spirits (Form 8906)	1n	<u> </u>	
0	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u 1v		
٧	Agricultural chemicals security (carryforward only)  Employer differential wage payments (Form 8932)	1w		
W	Carbon dioxide sequestration (Form 8933)	1x		
X	Qualified plug-in electric drive motor vehicle (Form 8936).	1y		
y 7	Qualified plug-in electric vehicle (carryforward only)	1z		
2 2 2	Employee retention (Form 5884-A)	1aa	ATTACHMENT 2	18,000.00
h	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb		
	Other Oil and gas production from marginal wells (Form 8904) and certain	122		<del></del>
	other credits (see instructions)	1zz	ATTACHMENT 2	128,960.00
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		182,687.00
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4 a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b	ATTACHMENT 2	33,507.00
c	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586, Part II)	4d		
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	ATTACHMENT 2	89,283.00
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		*
j	Reserved	4j		•
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		122,790.00
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		305,477.00

Form 3800 (2017)

95-1790021

#### J. PAUL GETTY TRUST

ATTACHMENT 1

### FORM 990-T, FORM 3800, PART III - GENERAL BUSINESS CREDITS OR ELIGIBLE SMALL BUSINESS CREDITS

LINE 1c - INCREASING RESEARCH ACTIVITIES (PASS-THROUGH ENTITY EIN)

77-0692885	48	32
26-0797359	1,40	)4
47-2124160	7:	19
47-1245315	6,8	59
81-1863836	1,32	22
20-3924596		5
81-3837664	2!	55
82-1928309	1,1	35
TOTAL	12,1	91

LINE 122 - OTHER CREDITS (PASS-THROUGH ENTITY EIN)

46-3569764	1,095
35-2436542	815
26-1413996	162
80-0965931	410
27-4827975	160
98-0500169	12,580
98-0546998	1,046
26-3948344	9
47-4202251	21
32-0432155	2,922
38-3865939	277
26-2230767	123
20-3924596	1
98-1162665	2,636
27-1014972	3,082
30-0568361	1,113
TOTAL	26,452

LINE 4b - WORK OPPORTUNITY CREDIT (PASS-THROUGH ENTITY EIN)

04-3455023	2
33-1192743	26
26-3948344	1,384
27-5270108	1,523
98-0546998	8,141
TOTAL	11,076

LINE 4f - EMPLOYER SOCIAL SECURITY AND MEDICARE TAX (PASS-THROUGH ENTITY EIN)

20-5786733	377
26-1269450	1
81-0835161	7
26-3948344	214
98-0546998	52,936
20-3924596	1,016
TOTAL	54,551

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ATTACHMENT 2

#### FORM 3800, GENERAL BUSINESS CREDIT, PART III CARRYFORWARD SCHEDULE

YEAR ENDING	AMOUNT GENERATED	AMOUNT UTILIZED	YEAR UTILIZED	• CARRYOVER
6/30/2012	4,306	-	^	4,306
6/30/2013	8,583	-		12,889
6/30/2014	9,607	_		22,496
6/30/2015	2,502	-		24,998
6/30/2016	3,559			28,557
6/30/2017	7,170			35,727
6/30/2018	12,191			47,918

YEAR	AMOUNT	THUOMA	YEAR	
ENDING /	GENERATED	UTILIZED	UTILIZED	CARRYOVER
6/30/2012	18,000	=		18,000
6/30/2013	-	-	×	18,000
6/30/2014	-			18,000
6/30/2015	•			18,000
6/30/2016	-			18,000
6/30/2017	-			18,000
6/30/2018	-			18,000
NUSED CREDIT	CARRYFORWARD TO 6/	30/2019		18,0

YEAR	AMOUNT	AMOUNT	YEAR	
ENDING	GENERATED	UTILIZED	UTILIZED	CARRYOVER
6/30/2012	14,648	-		14,648
6/30/2013	12,307	-		26,955
6/30/2014	7,588			34,543
6/30/2015	84,289			118,832
6/30/2016	9,794			128,626
6/30/2017	334			128,960
6/30/2018	26,452			155,412

YEAR	AMOUNT		YEAR	
ENDING	GENERATED	UTILIZED	UTILIZED	CARRYOVER
6/30/2012	4,402	-		`4,402
6/30/2013	1,651	-		6,053
6/30/2014	6,040			12,093
6/30/2015	4,505			16,598
6/30/2016	3,148			19,746
6/30/2017	13,761			33,507
6/30/2018	11,076			44,583
NUSED CREDIT	CARRYFORWARD TO 6/	30/2019		44,583

YEAR ENDING	AMOUNT GENERATED	AMOUNT UTILIZED	YEAR UTILIZED	CARRYOVER
BRUING	GENERATED	0110100	OTIBIBES	<u> </u>
6/30/2015	2,333	-		2,333
6/30/2016	36,421			38,754
6/30/2017	50,529			89,283
6/30/2018	54,551			143,834
NUSED CREDIT	CARRYFORWARD TO 6/	30/2019		143,834
OTAL GENERAL	BUSINESS CREDIT CA	RRYFORWARD		409,747